

Application for Nonresid	ent Permit (F	ees are nonrefund	able) Please com	plete this	form in its entire	ty.	
Original Issuance	\$27.00 Ap	Approved by		Permit #			
Duplicates	\$10.00 Da	10.00 Date		Exp. Date			
Have you ever been issued a	a previous Mary	land Nonresident F	Permit? 1 Yes		ocuanas data		
If "yes", please furnish the sti	cker number _				ssuance date		
Vehicle Owner	Vehicle Operator						
First Name Middle Last			First Name Middle		Middle		Last
Permanent Domicile Address	Temporary Maryland Address						
City County	State	Zip Code	City		County	State	Zip Code
Name of Insurance Company Policy/Binder #			Operator's Licer	nse No.	State of Issuance		Exp. Date
Vehicle ID Number	Year	Make & Body	Tag Number		State of Issuance		Exp. Date
Student Military Tem	Applicant Phone Number () -						
Name of School, Base or Employ	Address of Employer						
Length of Time	Reason for Visit						
Insurance: I certify, under penalty Laws and that this vehicle will be statements made herein are true	continuously ins	ured throughout its re	gistration period. I	further cert		,	•
Signature of Applicant		Date					

Instructions: Please complete the application in its entirety and submit with the following:

Photocopy of valid out-of-state driver's license.

Copy of your current vehicle registration card.

Student - Copy of your current student ID card or registration receipt indicating current enrollment.

Military Personnel - Copy of your current military ID or verification from commanding officer.

Temporary Employment - A letter from your employer, on their company letterhead, indicating the length of your anticipated employment in Maryland.

Visitor - A written statement, indicating the reason and length of stay in Maryland.

Note: This permit does not replace your home state's vehicle registration.

A copy of this application must be kept with the registration of the vehicle.

